

WHS MARCHING BAND REGISTRATION FORM

I Student Information

Name: _____

Address: _____
Number and Street

City, State and Zip

Phone: _____

E-Mail Address: _____

Current Instrument: _____

II Parent Information

Mother's Name: _____

Home Address (If different than above):

Number and Street

City, State and Zip

Occupation: _____ Work Phone Number: _____

E-Mail Address: _____

Father's Name: _____

Home Address (If different than above):

Number and Street

City, State and Zip

Occupation: _____ Work Phone Number: _____

E-Mail Address: _____